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Facsimile Transmittal

DATE: April 21, 2004

TO: USPTO

ATTN: EXAMINER Roy Karl Potter

RE: Serial No. 10/624,787

FAX: 703-298-6306⁸⁷²⁻⁹³⁰⁶

FROM: Howard S. Seo

Number of Pages Sent: 4 (including this transmittal cover sheet)

ATTACHED HERETO IS AN AMENDMENT IN (2) PAGES; A ONE (1) PAGE TRANSMITTAL. PLEASE CALL ME IF YOU HAVE ANY QUESTIONS.

I hereby certify that this correspondence is being sent VIA FACSIMILE to the Commissioner of Patents at fax number (703) 872-9306. Attention Office of Amendments, on:

April 21, 2004 (Date of Deposit)

Ann H. Andrews

(Name of the Person Making the Deposit)

(Signature)

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AMENDMENT TRANSMITTAL FORM

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Customer No.: 23696
Attorney Docket No.: 020378
In Re Application of: Lane et al.
Serial Number: 10/624,787
Filed: July 21, 2003
Examiner: Roy Karl Potter
Group Art Unit: 2822

Dear Sir:

Transmitted herewith for filing is a Response to Office Action in the above identified application.

CLAIMS	(a) Number Remaining After Amendment	(b) Highest Number Previously Paid For	(c) Extra Claims	Large Entity Fee	Fee Paid
Total*	24	39		x \$18 =	\$
Independent**	3	3		x \$86 =	\$
Multiple Dependent Claim(s): <input type="checkbox"/> Yes <input type="checkbox"/> No				\$290	\$
EXTENSION FEES <input type="checkbox"/> One Month <input type="checkbox"/> Two Months <input type="checkbox"/> Three Months				\$110	\$
				\$420	\$
				\$950	\$
TERMINAL DISCLAIMER				\$110	\$
				TOTAL FEE	\$

*If the number in column a is less than 20, enter 0 in column c.
**If the number in column a is less than 3, enter 0 in column c.

4. ☐ Fee check in the amount of \$_____ is enclosed to pay for any claim and/or extension fees.
5. ☐ Please charge Deposit Account No. 17-0026 of QUALCOMM Incorporated the amount of \$_____.
The Commissioner is hereby authorized to charge payment of any additional fees which may be required, or credit any overpayment to said Deposit Account No. 17-0026. A duplicate of this sheet is enclosed for fee processing.
6. ☒ The Commissioner is further hereby authorized to charge to said Deposit Account No. 17-0026, pursuant to 37 CFR 1.25(b), any fee whatsoever which may become properly due or payable, as set forth in 37 CFR 1.16 to 37 CFR 1.18 inclusive, for the entire pendency of this application without specific additional authorization.

Date: April 21, 2004

Signature: _____

Howard H. Seo, Reg. No. 43,106
Phone No. 858-845-5235

QUALCOMM Incorporated
Attn: Patent Department
5775 Morehouse Drive
San Diego, California 92121-1714
Telephone: (858) 658-5787
Facsimile: (858) 658-2502

CERTIFICATE OF MAILING/TRANSMISSION (37 CFR 1.8(a))

I hereby certify that this correspondence is, on the date shown below, being:

MAILING

- ☐ deposited with the United States Postal Service with sufficient postage as first class mail, in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Depositor's Name: _____
(type or print name)

Date: April 21, 2004

FACSIMILE

- ☒ transmitted by facsimile to the Patent and Trademark Office.

Depositor's Name: Ann H. Andrews
(type or print name)

Signature: _____

(TRANSAMD.VER1.13-07/30/03)

APR 21 2004

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PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of)
Lane et al.) For: METHOD FOR
Serial No.: 10/624,787) ACCOMMODATING SMALL
Filed: July 21, 2003) MINIMUM DIE IN WIRE
BONDED AREA ARRAY
) PACKAGES
) Group No.
2822

RESPONSE TO RESTRICTION REQUIREMENT

Commissioner of Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Attention: Examiner Roy Karl Potter

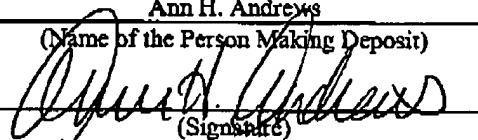
Dear Sir:

In response to the requirement for restriction, dated March 22, 2004, Applicant submits the following.

I hereby certify that this correspondence is being sent via facsimile to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on:

April 21, 2004
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Ann H. Andrews
(Name of the Person Making Deposit)


(Signature)

April 21, 2004
(Date of Signature)

[020378]

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REMARKS

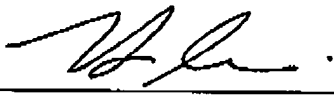
In response to the election requirement, the applicants elect Group I, claims 1-24. Please cancel claims 25-39 without prejudice or disclaimer.

The Examiner is invited to call the undersigned agent if a telephone call could help solve any remaining items.

The Commissioner is hereby authorized to charge any additional fees that may be required, or credit any overpayment, to Deposit Account No. 17-0026.

Respectfully submitted,

Dated: April 21, 2004

By: 
Howard H. Seo
Attorney for Applicants
Registration No. 43,106

QUALCOMM Incorporated
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San Diego, California 92121
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